

APPLICATION FOR ITINERANT MERCHANT

NOTE: Permit expires on December 31 of the current year

| | New Application | Renewal | Date: |
|----------------------------------|--|-----------------------|--|
| APPLICANT (first, | middle, last name): | | |
| DATE OF BIRTH: | | (If under 17 years of | of age, attach copy of birth certificate.) |
| CURRENT RESIDI | ENCE (include city, state and z | | |
| PERMANENT ADI | DRESS (include city, state and | zip code): | |
| CURRENT TELEP | HONE: () | | IONE: () |
| D.L. No. / ID No. : | | STATE: _ | |
| | roof of identification of applic of the preferred forms of identi | | license or state identification card with |
| NAME OF BUSINE | ESS OR ORGANIZATION: _ | | |
| ADDRESS: | | BUSINESS TELEPH | IONE () |
| NUMBER OF AT | LEAST ONE (1) REFEREN | CE IN EACH COMMUN | |
| | | | |
| | | | |
| | CT OR SERVICE FOR WHIC | | TING: |
| ARE PRODUCTS I | BEING SOLD EDIBLE? | IF YES, PLEASE A | TTACH HEALTH CERTIFICATE. |
| | OPY OF LIMITED SALES TA SALES TAX PERM | | THE STATE OF TEXASTAX EXEMPTION FORM |
| WILL YOU BE GO IN A STATIONAR | OING DOOR-TO-DOOR? Y LOCATION? | | |
| | GIVE LOCATION: LETTER OF PERMISSION F | FROM OWNER OF PROP | ERTY. |
| | BEEN CONVICTED OF AN NO IF YES, PLEASE | | JRPITUDE? E, LOCATION AND DISPOSITION |
| READ THE ATTA | | D UNDERSTAND ANY | EST OF MY KNOWLEDGE. I HAVE VIOLATION OF CITY CODE WILI |
| APPLICANT SIGN | ATURE | — DAT | E |

| Name of Applicant | |
|--------------------|--|
| | CITY USE ONLY |
| POLICE DEPARTMENT: | FINGERPRINTS AND WARRANT CHECK |
| | I have received and processed request and the results are: |
| | Identification Verified |
| | Identification Not Verified |
| | No Warrants |
| | Outstanding Warrants |
| | |
| | Signature of Person Processing Information |
| CITY SECRETARY: | |

_____ DENIED PERMIT

_____ ISSUED PERMIT TO EXPIRE: **DECEMBER 31,**_____